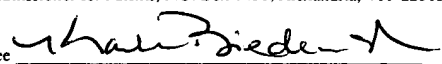
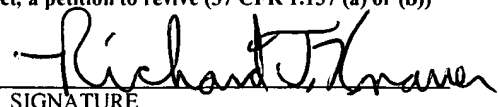


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| Form PTO-1390 (REV. 8-2004) | | U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE | ATTORNEY'S DOCKET NUMBER WP 21303 US |
| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371 | | | U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 10/518968 |
| INTERNATIONAL APPLICATION NO. PCT/EP2003/006613 | INTERNATIONAL FILING DATE June 24, 2003 | PRIORITY DATE CLAIMED June 29, 2002 | |
| TITLE OF INVENTION Automatic Differentiation of a Sample Solution and a Control Solution | | | |
| APPLICANT(S) FOR DO/EO/US Guenter FREY et al. | | | |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information: | | | |
| 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. 2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. 3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below. 4. <input checked="" type="checkbox"/> The US has been elected (Article 31). 5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)). a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau) b. <input type="checkbox"/> has been communicated by the International Bureau c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). 6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)). a. <input checked="" type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). 7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)). a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input type="checkbox"/> have not been made and will not be made. 8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)) 9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4). (unsigned) 10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). Items 11 to 20 below concern document(s) or information included: 11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98. 12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. 13. <input type="checkbox"/> A preliminary amendment. 14. <input type="checkbox"/> An Application Date Sheet Under 37 CFR 1.76. 15. <input type="checkbox"/> A substitute specification. 16. <input type="checkbox"/> A change of power of attorney and/or address letter. 17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rue 13ter.2 and 35 U.S.C. 1.821 – 1.825. 18. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4). 19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4). 20. <input checked="" type="checkbox"/> Other items or information: General Appointment of Representative <input type="checkbox"/> a. PCT Request <input type="checkbox"/> b. International Publication <input type="checkbox"/> c. Notification of Receipt of Demand <input type="checkbox"/> d. Search Report <input type="checkbox"/> e. Response <input type="checkbox"/> f. Written Opinion <input type="checkbox"/> g. Response <input type="checkbox"/> h. Forms PCT/IB/304,308,332 | | | |
| Express Mail label number: EV 421111484 US | | Date of Deposit: December 21, 2004 | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR §1.10 on the date indicated above and is addressed to MAIL STOP PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | | | |
| Signature of person mailing paper or fee | |  | |

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| U.S. APPLICATION NO. (if known, see 37 CFR 1.5) 10/518968 | | INTERNATIONAL APPLICATION NO. PCT/EP2003/006613 | | ATTORNEY'S DOCKET NUMBER WP 21303 US | | | | | | | | | |
| 21. <input checked="" type="checkbox"/> The following fees are submitted: <input checked="" type="checkbox"/> a) Basic national fee..... \$ 200.00 <input checked="" type="checkbox"/> b) Examination fee..... \$ 300.00 <input checked="" type="checkbox"/> c) Search fee..... \$ 500.00 TOTAL OF ABOVE CALCULATIONS = \$1000.00 <input type="checkbox"/> Additional fee for specification and drawings filed in papers over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Total Sheets</td> <td style="width: 15%;">Extra sheets</td> <td style="width: 40%;">Number of each additional 50 or fraction thereof (round up to a whole number)</td> <td style="width: 30%;">Rate</td> </tr> <tr> <td>-100</td> <td>/50 =</td> <td></td> <td>x \$250.00</td> </tr> </table> | | | | Total Sheets | Extra sheets | Number of each additional 50 or fraction thereof (round up to a whole number) | Rate | -100 | /50 = | | x \$250.00 | CALCULATIONS PTO USE ONLY | |
| | | | | Total Sheets | Extra sheets | Number of each additional 50 or fraction thereof (round up to a whole number) | Rate | | | | | | |
| | | | | -100 | /50 = | | x \$250.00 | | | | | | |
| | | | | \$ 200 | | | | | | | | | |
| | | | | \$ 300 | | | | | | | | | |
| \$ 500 | | | | | | | | | | | | | |
| \$ 1000 | | | | | | | | | | | | | |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 Months from the earliest claimed priority date (37 CFR 1.492(e)). | | | | \$ | | | | | | | | | |
| | | | | | | | | | | | | | |
| CLAIMS | | NUMBER FIELD | NUMBER EXTRA | RATE | | | | | | | | | |
| Total claims | | | | x \$50.00 | \$ | | | | | | | | |
| Independent claims | | | | x \$200.00 | \$ | | | | | | | | |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable) | | | | x \$360.00 | \$ | | | | | | | | |
| TOTAL OF ABOVE CALCULATIONS | | | | = | \$ 1000 | | | | | | | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2. | | | | + | \$ | | | | | | | | |
| SUBTOTAL | | | | = | \$ 1000 | | | | | | | | |
| Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)). | | | | | \$ | | | | | | | | |
| TOTAL NATIONAL FEE | | | | = | \$ 1000 | | | | | | | | |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property | | | | + | \$ | | | | | | | | |
| TOTAL FEES ENCLOSED | | | | = | \$ 1000 | | | | | | | | |
| | | | | | Amount to be refunded: | \$ | | | | | | | |
| | | | | | charged: | \$ | | | | | | | |
| a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed. b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. <u>02-2958</u> in the amount of \$ <u>1000</u> to cover the above fees. A duplicate copy of this sheet is enclosed. c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2958</u> . A duplicate of this sheet is enclosed. d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | | | | | | | |
| NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the application to pending status. | | | | | | | | | | | | | |
| SEND ALL CORRESPONDENCE TO: Richard T. Knauer Roche Diagnostics Operations, Inc. 9115 Hague Road Indianapolis, IN 46250 Customer No. 23690 | | | | | | | | | | | | | |
| | | | | |  SIGNATURE | | | | | | | | |
| | | | | | Richard T. Knauer NAME | | | | | | | | |
| | | | | | 35,575 REGISTRATION NUMBER | | | | | | | | |